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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> Allowance <input checked="" type="checkbox"/> <i>[Signature]</i> Examiner's Signature <i>MK</i> Initials	STATE OR COUNTRY MA	SHEETS DRAWING 31	TOTAL CLAIMS 91	INDEPENDENT CLAIMS 10
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TITLE  
 Devices and methods for tissue invagination

FILING FEE	FEEs: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of
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